

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. _____		FILING DATE _____				
							APPLICANT(S) _____						
CLAIMS													
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1		2					51		2				
2		2					52		2				
3		2					53		2				
4		2					54		2				
5		2					55		2				
6		2					56		2				
7		2					57		2				
8		2					58		2				
9		2					59		2				
10		2	20				60		2	20			
11		2					61		2				
12		2					62		2				
13		2					63		2				
14		2					64		①				
15		2					65		①				
16		2					66		①				
17		2					67		①				
18		2					68		①				
19		2					69		①				
20		2	20				70		①	13			
21		2					71		①				
22		2					72		①				
23		2					73		①				
24		2					74		①				
25		2					75		①				
26		2					76		①	6			
27		2					77						
28		2					78						
29		2					79						
30		2	20				80						
31		2					81						
32		2					82						
33		2					83						
34		2					84						
35		2					85						
36		2					86						
37		2					87						
38		2					88						
39		2					89						
40		2	20				90						
41		2					91						
42		2					92						
43		2					93						
44		2					94						
45		2					95						
46		2					96						
47		2					97						
48		2					98						
49		2					99						
50		2	20				100						
TOTAL IND.		↓		↓		↓	TOTAL IND.	4	↓		↓		↓
TOTAL DEP.		↓		↓		↓	TOTAL DEP.	320	↓		↓		↓
TOTAL CLAIMS							TOTAL CLAIMS	324					

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO.		FILING DATE		
							APPLICANT(S)				
CLAIMS											
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.
1	1										
2		1									
3		1									
4	1										
5		1									
6		1									
7		2									
8		2									
9		2									
10		2	12								
11		2									
12		2									
13		2									
14		2									
15		2									
16		2									
17		2									
18		2									
19		2									
20		2	20								
21		2									
22		2									
23		2									
24		2									
25		①									
26		2									
27		2									
28		2									
29		2									
30		2	19								
31		2									
32		2									
33		2									
34		2									
35		2									
36		2									
37		2									
38		2									
39		2									
40		2	20								
41		2									
42		2									
43		2									
44		2									
45		2									
46		2									
47		2									
48		2									
49		2									
50		2	20								
51		2									
52		2									
53		2									
54		2									
55		2									
56		2									
57		2									
58		2									
59		2									
60		2	20								
61		2									
62		2									
63		2									
64		2									
65		2									
66		2									
67		2									
68		2									
69		2									
70		2	20								
71		2									
72		2									
73		2									
74		2									
75		2									
76		2									
77		2									
78		2									
79		2									
80		2	20								
81		2									
82	1										
83		1									
84		1									
85		1									
86	1										
87		1									
88		1									
89		1									
90		2	10								
91		2									
92		2									
93		2									
94		2									
95		2									
96		2									
97		2									
98		2									
99		2									
100		2	20								
TOTAL IND.							TOTAL IND.				
TOTAL DEP.							TOTAL DEP.				
TOTAL CLAIMS							TOTAL CLAIMS				